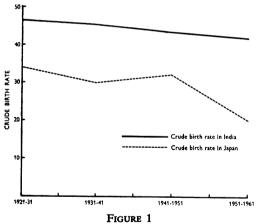
Population Control in Japan: Lessons for India*

THE SHARP DECLINE in Japan's crude birth rate of 34.4 in 1947 to 17.2 in 1957 is unique in the demographic history of the world. Why and how did the Japanese birth rate fall so steadily in such a short period? What lessons, if any, has the Japanese experience of population control to offer to India?

Japan is the only nation in Asia that has achieved both a demographic transition and a substantial measure of economic development. During the last quarter of the nineteenth century she had birth rates "not much below" 40 per 1,000 population¹⁹ as compared with an estimated birth rate above 45 per 1,000 for India for the same period.¹ The practice of family limitation by infanticide in Japan was reported



Crude birth rates in India and Japan, 1921-61

to have been the reason for this disparity between the two countries. During the period 1921-61 the difference in birth rates between India and Japan widened, as is shown in Figure 1. The slight increase in birth rates in Japan in the period 1941-51 was due to the pro-natalist policy of the Japanese Government during the Second World War period.

Factors affecting Fertility

The fall in Japanese fertility may be attributed to the following factors:

First, socio-economic factors such as industrialization, urbanization, employment of women in non-agricultural occupations, increasing literacy, development of transport and communications systems and the absence of glaring cultural differences in the Japanese population were all influential in inducing a decline in Japanese fertility. Though some of these factors are now present in India they have not yet helped towards a fertility decline, as I have pointed out elsewhere. 16

Second, the psychological impact of the defeat of Japan in the Second World War, the loss of an empire and the desire to regain the pre-war standard of living, and even to raise it, provided further incentives to Japanese couples to limit their families.

Third, since there was already an established tradition of family limitation, the Japanese were not reluctant to make use of any available technique to help them to limit their families.

Fourth, the Japanese Government, which had always viewed family limitation with disfavour, assumed a permissive attitude in such matters in 1948.

We may discuss these matters in more detail.

Socio-economic Factors

As in most of the western nations, the most important factor leading to a fertility decline in Japan was economic development and the associated industrialization. In other words, fertility decline did not happen in a static

^{*} I am indebted to Professor S. G. Triantis and Professor M. H. Watkins of the Department of Political Economy of the University of Toronto for their valuable comments on this paper.

agricultural Japan but in a dynamic nation rapidly becoming industrialized. When Japan was laying the foundations of industry, the mortality rates were high. Therefore, a high birth rate was not an obstacle to economic development. Between 1875 and 1918—the period when industrialization began—the rate of annual increase of the Japanese population was 1 per cent¹⁹ as compared to 2·2 per cent for India during 1951–61. Such a low rate of population growth meant a lower dependency burden, higher rate of savings and a smaller amount of capital investment to produce a given level of income.

Industrialization made quick progress in Japan from the last quarter of the nineteenth century as may be seen from the following figures:

The total value of manufactured goods, at constant prices, rose fifteen-fold between 1878 and 1900, eleven-fold between 1900 and 1925 and five-fold between 1925 and 1940. In 1872, 705,000 persons were gainfully employed in manufacture. Their numbers rose to 2,826,000 in 1900 and 7,160,000 in 1940.

The trend of industrialization remained unaltered after the war. By 1947, the percentage of gainfully occupied persons in secondary and tertiary sectors was 46.6 per cent; it rose to 67.2 per cent by 1960.13 This was also the period during which fertility registered a sharp decline. By comparison, in India the percentages of gainfully occupied persons in secondary and tertiary sectors were 27.2 in 1951 and 27.7 in 1961.7

Side by side with industrialization, urbanization made rapid strides in Japan. As early as 1934, the urban population of Japan formed 24·5 per cent of the total as compared with percentages of 29·6 in the USA (1930), 30·1 in Germany (1933), 39·6 in Great Britain (1931), 17·4 in Italy (1931) and 15·7 in France (1931).8 The percentage of urban population in Japan rose from 18 to 41 between 1920 and 1944 as compared to an increase from 11 to 17 per cent between 1931 and 1961 in India.9

The extent and rapidity of urbanization, the damage caused to urban houses by bombings during the Second World War and the occurrence of frequent earthquakes in Japan created an acute shortage of housing which acted as a powerful deterrent to marriage and higher rates

of fertility. Complaints about shortage of housing such as, "Want to get married but have no place to live in"; "Sure, there are dwellings but they cost too much"; "Want to have children, but how can we raise them in such surroundings as these?"; "Commuting takes all the energy out of me", 12 were very common. Because of the housing shortage, three million households (17 per cent of the total) in 1953 lived in normally non-dwelling buildings, overcrowded quarters or in superannuated dwellings. 11

The problem of urban housing has been equally bad in India, but there the urban population forms a smaller percentage of the total than in Japan. Further, a grave shortage of urban housing has always existed in India, whereas in Japan this problem became intense only after the war. Moreover, the illiterate and poorly-housed population of India's urban areas accepted such inconveniences passively as inevitable, while the literate and inadequately housed urban Japanese did not consider such a housing shortage as either inevitable or unalterable.

A particularly important factor in the decline in Japanese fertility was the employment of women in factories. The incentives and inducements to postpone marriage, or limit the number of children within marriage, are stronger among women in non-agricultural occupations than among those working in agricultural or in fulltime housewifery. Because of the preponderance of textile factories, where four-fifths of the workers were women, 59 per cent of all factory workers in 1895-1899 were women. In 1940. 43.2 per cent of all gainfully occupied females were in non-agricultural occupations. 19 The years they spent in the factory postponed the age of marriage. By 1955, over 80 per cent of Japanese women in the 15-24 age group were unmarried,19 whereas, in India in 1951, the percentage was only 17.2

Apart from the postponement of marriage, the experience of working girls in the factory and their outside contacts made them receptive to new ideas and stimulated a powerful dislike for the drudgery of farm life and of big families, and a longing for the amenities of modern living. All these factors motivated a reduction in family size.

Compared with the percentage of women employed in non-agricultural occupations in Japan, the corresponding figures for India are quite unimpressive. During the period 1950–56, only 10 to 11 per cent of all factory employees were women: their number did not exceed 0·3 million.¹⁷ The percentage of females in non-agricultural occupations as compared with all employed women in India was 20·4 per cent in 1961.³

Another effective force in the control of fertility in Japan has been the spread of education. The inverse correlation between education and fertility is a world-wide phenomenon.

Japan has a high rate of literacy. Compulsory primary education started as early as 1872 when a royal order said that "if a child, male or female, does not attend an elementary school, the guardian shall be held responsible for the neglect". 19 This policy continued and by the second quarter of the twentieth century "the Japanese were one of the most literate peoples in the world". In 1950, 93.5 per cent of the men and 84.1 per cent of the women had received at least four years of schooling. 19 By comparison, as late as 1961 only 28.8 per cent of the population of India above five years of age was literate.

The well-developed systems of transport and means of communication in Japan increased mobility and the dissemination of ideas. The following table compares certain means of transport and communication in Japan and India.

TABLE 1

The use of various means of transport and communication in Japan (1953) and India (1960–61)

	Japan 1953	India 1960–61
National and private railway (kilo- metres travelled per person per year)	1236-0	68.6
Private buses (kilometres travelled per person per year) Number of postal articles handled (per	25.3	n.a.
person per year) Radio receiving sets (per 1,000 popula-	46.0	9.2
tion) Radio listeners (per 1,000 population)	n.a. 127·0	4·5 n.a.

(Sources: The Oriental Economist, XXII:519, p. 25, XXIII:539, p. 446; India, Government, India: A Reference Annual, 1962, Ministry of Information and Broadcasting, pp. 349, 363, 370, 371; United Nations, Statistical Year Book, 1962, pp. 649, 856.

The extensive use of transport and communication systems in Japan is probably one of the factors that helped the rapid dissemination of the knowledge of family limitation.

Finally, Japanese people were not divided by religion and language, and there was no incentive for one sect to strive for numerical superiority over another. There was complete religious toleration between adherents of Shintoism and of Buddhism (57 per cent and 40 per cent of the population respectively). Religious toleration in Japan is demonstrated by the fact that there were 110 million "believers" in 1950, while the total population was only 83·2 million. Uniquistically, there was perfect homogeneity in Japan. These features of Japanese society are in marked contrast with those of India as has been shown in the recent developments over questions of language and religion in India.

These socio-economic factors brought about changes in ways and levels of living in Japan. Steady industrialization coupled with rapid urbanization had a significant impact on Japanese fertility. The new industrial population. living in cities and possessing a high level of literacy, became estranged from the agrarian milieu and was subjected to new stimuli and pressures. Familial values and attitudes were recast in new moulds. Marriage and fertility patterns and the role of women underwent changes to suit the changed environments. Marriages were delayed, the rate of marriage was lowered and the desired number of children in a family was reduced. Improved transport and communication, a high standard of literacy and the absence of any cultural diversities in the Japanese population helped the dissemination of these new attitudes, values and practices to a greater and greater number of couples.

Psychological Factors

Psychological factors also contributed to the decline of fertility in Japan. In 1945, Japan had not only lost a war but also had lost an empire that embraced more than 100 million people. About one-third of this population lived in the colonies Japan had acquired—Taiwan, Korea and Manchuria.

Even outside her colonies Japan had been

able to find emigration outlets. The future prospects of the Japanese race looked bright indeed. To satisfy the needs for human resources of Japanese stock within and outside the empire a pro-natalist policy was adopted during the Second World War.

After the war Japan lost both her empire and her influence outside it. Her rice granaries and markets for industrial products had gone; her industrial potential was severely damaged. Above all, 6.25 million Japanese living outside the Japanese Islands were repatriated during the 1945–49 period⁶ and had to be accommodated in a dislocated economy. Because of all these factors there was little optimism among the Japanese about either the industrial future of their country or their own future economic well-being. A crisis appears to have occurred in the confidence of the Japanese regarding their ability to feed, clothe and house an increasing population.

The psychological effects of a changed political, economic and international situation had a message that was not lost on the literate and alert population of Japan. The changed prospects were promptly assessed and the inevitable conclusion was drawn without delay: Japan could not afford to add a large number to her population and, therefore, families had to be limited at all costs.

The urge to regain the lost level of living was supplemented by a continuing urge to raise it further once the old levels were attained. The American occupation of Japan aided this process. There took place a frequent exchange of visitors between USA and Japan and the desire to match the American pattern and level of consumption became very strong in the average Japanese. It became customary for Japanese business men to advertise their wares as "Now popular in America", "Made in America", "Imported directly from America", "In America people use this daily" and so on. The frequency of such advertisements doubled between 1947 and 1955 in some well-known newspapers.5 Many useful and convenient gadgets developed in the USA were imported into Japan and the Japanese industrialists lost no time in turning out similar articles in great bulk and at low prices. As already noted, the rapid progress of

mass communication media aided the spread of this growing cult of higher levels of consumption. Even at present "measuring himself against American levels of consumption—as depicted in Hollywood movies or modelled on the spot by free-spending GIs and tourists—he [the average Japanese] is awed by the gap [between American and Japanese levels of consumption] that remains".14

It is suspected that the rise in suicide rates in Japan during the early 1950s was a direct result of the failure of many Japanese to achieve the level of living they aspired to. In 1954, with an estimated 20,000 deaths, suicides ranked ninth among the major causes of death for the first time in Japanese history.¹⁰

The determination of the Japanese people to narrow the gap between aspirational goals and practical achievements reinforced the desire further to reduce their fertility. The attitude of Japanese couples towards the need for, and the number of, children underwent changes. The need for children was no longer predominantly the assurance of security in old age. Parents who wished ultimately to depend on their children for support decreased from 55 per cent of all married couples in 1950 to 32 per cent in 1961.15 Also the ideal family size decreased during the period 1950-59. When those couples who had two children were asked in 1950 how many more they would like to have, 30 per cent answered "no more", while in 1959, 58 per cent gave the same answer.15

Except for the occasional shortage of food grains, India had no similar experience to influence her people to limit their families. On the other hand, the dawn of political freedom in 1947 made educated Indians feel that a period of unchecked prosperity was ahead. Since the percentage of educated Indians was very low this might not have had any observable effect on total fertility. However, this feeling of undiluted optimism about the country's economic future did have an effect on the formulation of a population policy in India.

The Influence of Tradition

Even in pre-industrial Japan a strong tradition of family limitation kept fertility lower than in most other countries in their pre-industrial stage. Literature available on the family limitation practices of the Japanese from the seventeenth to the nineteenth centuries suggests that infanticide (mabiki, originally meaning "thinning seedlings") and abortion were commonly practised. 18 So much so, that in the seventeenth century, the Government of Japan used priests, preachers and teachers to discourage the people from committing infanticide. With the same purpose, devout Buddhist peasants were encouraged to settle down in areas where infanticide was widespread. As to contraceptives, abortion and infanticide "there was no sharp differentiation among the three as biological procedures or ethical concepts". 19 and hence it was immaterial which method was used for limiting families.

This tradition of family limitation was totally lacking in India where familistic and other values put a premium on large families.

The Government and Population Control

There was also in Japan a tradition of governmental interference in matters of population growth, either to discourage certain techniques of family limitation or to encourage the growth of population. This was quite unknown in India before 1952. The measures adopted in the seventeenth century by the Japanese Government to prevent infanticide have already been mentioned. In 1927, in view of the increasing population, the Government of Japan created a Department of Overseas Affairs to promote emigration from Japan and a Commissioner was appointed to study the problems of population and food supply. In the early 1940s "all measures conducive to the limitation of the size of the family were placed under strict official denunciation".18

During the American occupation, the problem of population growth in Japan received widespread publicity because of certain actions of the Government. For instance, since it was believed by the occupation authorities that permission given to Mrs. Margaret Sanger to visit the country might be interpreted by the Japanese as an attempt to interfere in their population policy, the Supreme Commander of Allied

Powers (SCAP), General Douglas MacArthur, refused permission for her to visit Japan in 1949. It was at this time that SCAP's Natural Resources Section prepared and published a report containing an analysis of the natural resources of Japan. The report stated that "the population problem was part of the resources problem, and that the problem created by reduced death rates could hardly be solved humanely except through reduced birth rates".19 The publication of this statement was protested against by some Catholic organizations in Tokyo. As a result MacArthur assured the Japanese that "decisions thereon [matters of population controll rest entirely with the Japanese themselves Birth control with its social, economic and theological sides, is in final analysis, for individual judgement and decision". 19 After this assurance, copies of the Report on Natural Resources were recalled and the "offending" passages were expunged. These actions made the issue a lively topic of discussion even in the remote corners of Japan. Thus the people became increasingly informed and aware of the nature of the population problem their country faced.

Though for several reasons population control had become a controversial issue in India in the 1940s and the 1950s, since the literacy rates were low and facilities for communication inadequate, the participants in the discussion were few.

In May 1948, the Eugenic Protection Law permitted induced abortions in Japan in the case of "a mother whose health may be affected seriously by delivery, from the physical or economic viewpoint";6 a qualitative excuse thus being given to a decision which dealt with a primarily quantitative problem. Thus in matters of birth control the Japanese Government came to assume a permissive role; and that was sufficient for the married couples of Japan who were highly motivated to limit their families. The lack of sophistication in the method of birth control known—abortion—provided little obstacle to the determination of the Japanese to curtail fertility. The effect on their birth rate was immediate and drastic.

Hitherto, the illegal nature of surgical abortion as a method of family limitation was the barrage

that prevented many people from matching the desired number of children with the actual number. When all of a sudden this barrage was swept away, the birth rate came tumbling down at a rate quite unprecedented in the demographic history of any nation.

The next step was to set up, in 1949, a Population Problems Council in the Japanese Cabinet which recommended the dissemination of family planning information. The recommendation was not acceptable to the Government of Japan and the Council was dissolved within the year. Nevertheless, the birth rate continued to fall and remained at 25·3 in 1951 as compared to 34·4 in 1947, primarily due to the increased

First, although from an ethical point of view, Japanese culture does not differentiate between the use of infanticide, abortion and contraception for preventing births, in the process of Westernization, certain elements of Western thought, such as a greater concern for the born than for the unborn, penetrated into Japanese culture and, as a result, abortion appeared to be less immoral than the old practice of infanticide.

Second, since Japanese couples took full advantage of the extensive system of social insurance, the cost of an induced abortion was less in many cases than the cost of using even the cheapest of contraceptives: for example, the

TABLE 2

Relative popularity of contraception and abortion in Japan, 1950-61

	Percentage of couples or wives			
Year	in favour of contraception	with contraceptive knowledge	ever practised or currently practising contraception	having experienced at least one abortion
1950	60.7	n.a.	29·1	n.a.
1952	65.0	50.6	40.2	15.4
1955	67.4	55.4	52.5	26.5
1957	72.0	61.7	56.5	29.7
1959	74.2	70.2	62.7	35.1
1961	70.4	74.1	68.7	40.8

(Sources: The Population Problems Research Council, Fifth Public Opinion Survey on Birth Control in Japan, The Mainichi Newspapers, Tokyo, 1961, pp. 14, 17, 19, 33 and Sixth Opinion Survey on Family Planning and Birth Control: A Preliminary Report, pp. 17, 23, 31.)

rate of induced abortions. Japan's Minister of Welfare became concerned with the situation because, in his words, "abortion exerts undesirable effects on maternal health".6 His view was that the Government should start disseminating contraceptive information in an attempt to decrease the incidence of abortion with its undesirable effects. The Government decided in favour of this objective in October 1951. During the period 1952–55, 148 million yen (£146,000) were appropriated for the dissemination of contraceptive information.18

In spite of such efforts made for the spread of contraception, abortion remained in the 1950s the modal means of limiting families. Three main reasons account for the greater use of abortion than of contraception during this period.

cost of an induced abortion to the wife of a company employee varied between 50 yen (1s.) and 300 yen (6s.). The cost of an induced abortion may be compared to the cost of condoms at approximately 100–200 yen per dozen, 150–200 yen apiece for vaginal diaphragms, approximately 150 yen for 16 foam tablets and 200 yen per tube of jelly containing 50 gm. A year's supply of contraceptives would therefore cost several times the price of an induced abortion and naturally, the cheaper method of family limitation was preferred.

Third, with this strong motivation towards family limitation, abortion was freely resorted to when pregnancies resulted from contraceptive failure or from the irregular use of contraception. In 1959, those who terminated pregnancy artificially following the irregular or

incorrect use of contraceptives formed 58.4 per cent of the total number of wives who had abortions. While 42.7 per cent of the wives with no contraceptive experience had more than one abortion, the percentage of wives with contraceptive experience who had more than one abortion was 52.2.15

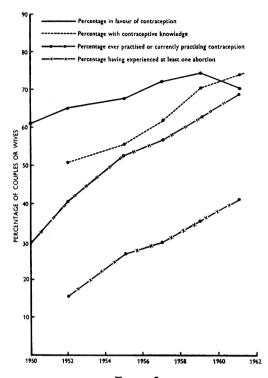


FIGURE 2
Relative popularity of contraception and abortion in Japan, 1950-61

Because of the aforementioned factors, when the Eugenic Protection Law of 1948 also allowed abortion on socio-economic grounds, abortion was used on a large scale. In 1952, 68.4 per cent of all Japanese wives had not experienced an abortion; but by 1961 their percentage fell to 35.6.15

Contraceptives were, however, also used because information on birth control was readily available and contraceptives of reliable quality were easily procurable and were within the means of average Japanese couples. However, an increase in artificial termination of pregnancy was taking place pari passu with increased

popularity of contraception as seen from Table 2 and Figure 2.

The strong motivation of Japanese couples to limit their families is indicated in two ways by the table and the figure.

- (a) The closeness of the percentages for contraceptive knowledge and practice reveals that most of the Japanese couples who knew of contraception did attempt it.
- (b) The increasing rate of induced abortions, along with an increasing percentage of couples practising family limitation, suggests that in spite of contraceptive failures—which must have been common—the Japanese couples did not give up their decision to limit their families.

During the period 1957-59, for every birth prevented by contraception, 2.5 births (based on reported rates of abortion) were prevented by abortion. It might also be remembered that by 1957-59, 63 per cent of the couples had practised, or were practising contraception.

Lessons for India

Now, it might be asked whether the Japanese experience of population control has any lessons for India. The Japanese experience offers at least two suggestions in the preparation of blueprints for fertility control in India.

First, there is the lesson drawn from the demographic experiences of several Western countries that once the people develop a strong motivation for limiting the number of their children, irrespective of, or notwithstanding, the governmental attitude, and irrespective of the means to be used, families will be limited. This is reaffirmed by the Japanese experience, and reminds us that one of the principal problems facing the Government of India in their efforts to make population control successful is the creation of a strong motivation for Indian couples to limit their families. Though some of the social, economic and psychological factors which were so influential in Japan are making their appearance in India, they are not yet strong enough to influence the trend of fertility in the downward direction. The Government of India must therefore create or strengthen this motivation by providing economic incentives for those who limit their families and disincentives for those

who refuse to do so; such as policy, combined with a free contraceptive or sterilization service is, in time, likely to become acceptable to most peoples in India.

The second lesson concerns the technique of family limitation. It has been seen from the experience of Japan that a rapid decline in fertility is unlikely to come from the widespread use of contraceptives within a short period. Even the educated, docile and well-to-do population of Japan the diffusion of effective contraceptive practice was not rapid. Since the failure rate among the users of contraceptives was, and continues to be, high, the Japanese had to use the drastic method of abortion to achieve the desired family size.

The rate of acceptance of contraception in India is likely to be even slower, in spite of the activist role assumed by the Government. This is to be expected in view of the weak motivation for family limitation, low standards of literacy and living and the smaller percentage of the urban population in India. For the same reasons the failure rate of contraceptives will probably be higher. The introduction of intra-uterine devices, which have very low failure rates, is the only silver lining to an otherwise dark cloud, but fertility control through contraception is likely to be a long-drawn-out process.

For speedy results in population control, India may need "drastic" methods, though not the same as those of Japan. Since abortion is likely to be economically unsuitable, medically impracticable and morally unacceptable in India, voluntary sterilization, particularly of the male, may provide the answer in the interim period between the present non-contraceptive stage and the future contraceptive stage of the Indian population.

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